



DOCKET: FIS920030380US1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR: Ronald L. Gordon et al.) EXAMINER: D. Rashid
SERIAL NO.: 10/708,515) ART UNIT: 2624
FILING DATE: March 9, 2004) DATE: May 20, 2008

FOR: OPTIMIZED PLACEMENT OF SUB-
RESOLUTION ASSIST FEATURES WITHIN
TWO-DIMENSIONAL ENVIRONMENTS

PETITION FOR EXTENSION OF TIME AND ACCOMPANYING FEE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date indicated below as first class mail in an envelope addressed to the Mail Stop Amendment, Commissioner of Patents, P. O. Box 1450, Alexandria, VA 22313-1450.
Name: Carol M. Thomas Date: May 20, 2008

Signature: *Carol M. Thomas*

Dear Sir:

(A) **Extension of Time:**

The undersigned Attorney respectfully petitions the Honorable Commissioner of Patents and Trademarks to extend the time for taking action in the above-identified application for the period of time indicated below.

- (1) Original Period for Response was Set to Expire on May 14, 2008
- (2) Statutory Period Expires August 14, 2008

Extension now requested is for the period of one month from the date (1) above.

(B) **Total Fee for this Petition filed herewith:**

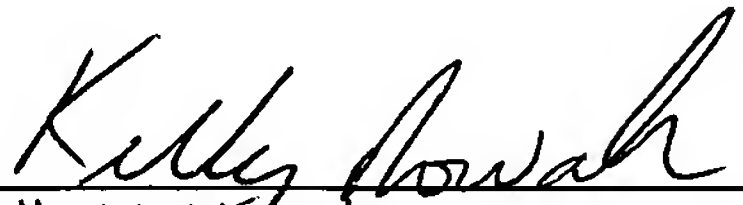
- (X) The total fee, in the amount of \$120.00, is attached.
- () The total fee, in the amount of \$_____, is to be charged to credit card.

05/27/2008 55ESHE1 00000017 10708515

01 FC:1251 120.00 DP

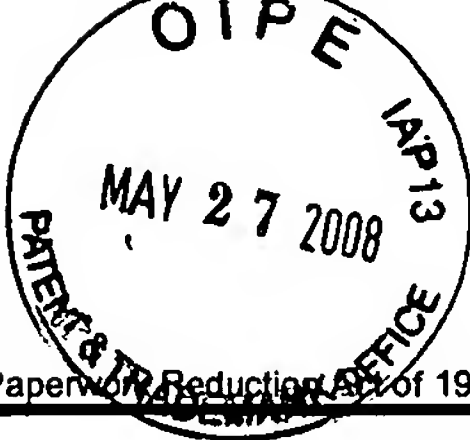
Please charge any additional fee which may be required for this Petition, or credit any overpayment, to Deposit Account No. 04-0566.

Respectfully submitted,



Kelly M. Nowak
Reg. No. 47,898

DeLIO & PETERSON, LLC
121 Whitney Avenue
New Haven, CT 06510-1241
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Efw

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120.00

Complete if Known

Application Number	10/708,515
Filing Date	2004-03-09
First Named Inventor	Ronald L. Gordon
Examiner Name	D. Rashid
Art Unit	2624
Attorney Docket No.	FIS920030380US1

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 04-0566 Deposit Account Name: DeLio & Peterson LLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
210	105
370	185

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
22/22 pd - 20 or HP =	0	x 50.00 =	0

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4/3 pd - 3 or HP =	0	x 210.00 =	0

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
	0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for One Month Extension of Time 120.00

SUBMITTED BY

Signature	/Kelly M. Nowak/	Registration No. (Attorney/Agent) 47,898	Telephone 203-787-0595
Name (Print/Type)	Kelly M. Nowak		Date May 20, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.